

JONATHAN E. FIELDING, M.D., M.P.H.

JONATHAN E. FREEDMAN Chief Deputy Director

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www.publichealth.lacounty.gov

May 29, 2012

**ADOPTED** 

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

42

May 29, 2012

SACHI A. HAMAI EXECUTIVE OFFICER

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The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

**Dear Supervisors:** 

AUTHORIZATION TO ACCEPT AND IMPLEMENT A FORTHCOMING GRANT AWARD FROM FIRST 5 LA FOR THE BLACK INFANT HEALTH PROGRAM AND APPROVAL OF FIVE AMENDMENTS TO BLACK INFANT HEALTH PROGRAM SERVICES AGREEMENTS FOR THE PERIOD JULY 1, 2012 THROUGH JUNE 30, 2014 (ALL SUPERVISORIAL DISTRICTS)

(3 VOTES)

#### SUBJECT

Provide authorization to accept and implement a forthcoming grant award from First 5 LA and execute five amendments to support the Department of Public Health Black Infant Health Program.

#### IT IS RECOMMENDED THAT YOUR BOARD:

- 1. Delegate authority to the Director of the Department of Public Health (DPH), or his designee, to accept and implement a forthcoming grant award from First 5 LA to support the DPH Maternal, Child and Adolescent Health Program's Black Infant Health (BIH) Program services for the period July 1, 2012 through June 30, 2013 in the amount of \$816,058, subject to review and approval by County Counsel, and notification to your Board and the Chief Executive Office (CEO).
- 2. Delegate authority to the Director of DPH, or his designee, to accept future awards and/or amendments that are consistent with the requirements of the grant award that extend the term through June 30, 2014; reflect non-material and/or ministerial revisions to the award's terms and conditions; allow for the rollover of unspent funds and/or redirection of funds; adjust the term of the award through December 31, 2014; and/or provide an increase or decrease in funding up to 25 percent above or below each award term's annual base amount, subject to review and approval by

The Honorable Board of Supervisors 5/29/2012 Page 2

County Counsel, and notification to your Board and the CEO.

- 3. Delegate authority to the Director of DPH, or his designee, to execute amendments, substantially similar to Exhibit I, with the five BIH service providers identified in Attachment A, to provide BIH services for the period July 1, 2012 through June 30, 2013, in the total amount of \$1,875,000, 100 percent offset by First 5 LA and California Department of Public Health (CDPH) grant funds.
- 4. Delegate authority to the Director of DPH, or his designee, to execute amendments to the BIH agreements that extend the term through June 30, 2014; allow for the rollover of unspent funds; adjust the term of the agreements through December 31, 2014; and/or provide an internal reallocation of funds between budgets, an increase, or decrease in funding up to 10 percent above or below each term's annual base maximum obligation, effective upon amendment execution or at the beginning of the applicable agreement term, subject to review and approval by County Counsel, and notification to your Board and the CEO.

#### PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Approval of Recommendations 1 and 2 will allow DPH to accept the forthcoming grant award from First 5 LA and accept future awards and/or amendments that are consistent with the requirements of the award to extend and/or adjust the term of the award; reflect non-material revisions to terms and conditions; rollover unspent funds and/or redirect funds; and/or provide an increase or decrease in funding up to 25 percent above or below each grant term's annual base amount. These recommended actions will enable DPH to accept awards and/or amendments that adjust the project period up to six months beyond the original term, in those instances where there has been an unanticipated extension of the term to allow additional time to complete services and utilize grant funding. This authority is being requested to enhance DPH's efforts to expeditiously maximize grant revenue, consistent with Board Policy 4.070: Full Utilization of Grant funds. These funds support the BIH Program's efforts to promote better health services for pregnant and parenting African-American women in Los Angeles County by assuring that at-risk pregnant and parenting women (ages 18 years and older) and their children (up to age one) have access to appropriate pediatric and preventive health care.

Approval of Recommendation 3 will allow DPH to execute amendments to the five County Contracts for the provision of BIH services, effective July 1, 2012 through June 30, 2013. Services to be provided include, but are not limited to: providing health education information about issues impacting mothers and infants; coordinating with providers to ensure timely access to health care services; conducting social support and empowerment classes; and collaborating with other entities to strategize to reduce African-American infant mortality. Through five community-based agencies (The Children's Collective, Inc., Great Beginnings for Black Babies, Mission City Community Network, Inc., Prototypes Centers for Innovation in Health, Mental Health and Social Services, and Partners in Care Foundation), Los Angeles County provides BIH services to six Service Planning Areas (SPAs): SPA 1 (Antelope Valley), SPA 2 (San Fernando Valley), SPA 3 (San Gabriel Valley), SPA 4 (Metro area), and SPAs 6 and 8 (South Los Angeles). Based on data analysis of perinatal health indicators, such as low birth weight and infant mortality, SPAs 5 and 7 were not geographic areas of need.

Approval of Recommendation 4 will allow DPH to execute amendments to the agreements to extend and/or adjust the term of the agreements; rollover unspent funds; and/or internally reallocate funds

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between budgets and/or increase or decrease funding up to 10 percent above or below annual base maximum obligation, effective upon amendment execution or at the beginning of the applicable agreement term. This recommended action will enable DPH to amend the agreements to adjust the term for a period of to six months beyond the expiration date. Such amendments will only be executed if and when there is an unanticipated extension of the term of the applicable grant funding to allow additional time to complete services and utilize grant funding. This authority is being requested to enhance DPH's efforts to expeditiously maximize grant revenue, consistent with Board Policy 4.070: Full Utilization of Grant Funds.

Approval of Recommendation 4 will also enable DPH to amend the agreements to allow for the provision of additional units of funded services that are above the service level identified in the current agreement and/or the inclusion of unreimbursed eligible costs, based on the availability of award funds and funder approval. While the County is under no obligation to pay a contractor beyond what is identified in the original executed agreement, the County may determine that the contractor has provided evidence of eligible costs for qualifying contracted services and that it is in the County's best interest to increase the maximum contract obligation as a result of receipt of additional grant funds or a determination that funds should be reallocated. This recommendation has no impact on net County cost.

#### **Implementation of Strategic Plan Goals**

The recommended actions support Goal 3, Integrated Services Delivery, of the County's Strategic Plan.

#### FISCAL IMPACT/FINANCING

DPH will accept a forthcoming First 5 LA grant award in the amount of \$816,058 for fiscal year (FY) 2012-13. The First 5 LA funds will support DPH personnel and operating expenses in the approximate amount of \$119,321, as well as the five BIH agreements in the approximate amount of \$696,737, which reflects prior year funding levels.

The total cost for the BIH agreements for FY 2012-13 is \$1,875,000, consisting of approximately \$696,737 from First 5 LA and approximately \$1,178,263 from existing CDPH federal Title V and Title XIX funds.

Funding is included in DPH's FY 2012-13 Proposed Budget and will be requested in future FYs, as necessary.

#### FACTS AND PROVISIONS/LEGAL REQUIREMENTS

On July 1, 2009, State General Funds were eliminated from the BIH Program budget due to reductions in program funding enacted in the FY 2009-10 State Budget. This included the elimination of a \$3.9 million allocation to BIH Programs statewide and a total of \$1.3 million to the BIH Programs in Los Angeles County. On August 18, 2009, a Board motion requested First 5 LA to consider an annual award of \$766,058 to DPH to support the five community-based agencies providing BIH services in Los Angeles County and consequently First 5 LA approved the funding. An additional \$50,000 was approved by First 5 LA to increase the allocation for the BIH Program in Antelope Valley where the infant mortality rate among the African-American population was higher than other areas in the County.

The Honorable Board of Supervisors 5/29/2012 Page 4

Subsequently, on September 10, 2009, the First 5 LA Commission voted unanimously to award funding for the continuation of the BIH program for the period of October 1, 2009 through June 30, 2010 and on November 17, 2009, your Board approved acceptance of the First 5 LA award. On June 29, 2010, DPH exercised its delegated authority and accepted the First 5 LA Grant Award through June 30, 2011 in the amount of \$816,058 and executed amendments to the BIH agreements to extend the term through FY 2010-11. On June 13, 2011, DPH exercised its delegated authority and accepted the First 5 LA Grant Award through June 30, 2012 in the amount of \$816,058. On June 30, 2011 DPH exercised its delegated authority and executed amendments to the BIH agreements through FY 2011-12.

On January 24, 2011, DPH was notified that First 5 LA approved additional funding for BIH Program services through June 30, 2014. On April 7, 2011, your Board was notified that DPH planned to submit a Board letter to extend the contracts with the BIH agencies providing BIH services.

County Counsel has approved Exhibit I as to form.

#### **CONTRACTING PROCESS**

The current BIH contracts have been in place since 2004. In 2010, CDPH implemented a new BIH service model throughout the State with the exception of Los Angeles County. Los Angeles County was exempted from participating in the initial implementation of the new BIH model until positive client outcomes could be demonstrated in the other counties that were piloting the program. Los Angeles County is the only jurisdiction in the State using the prior State BIH model.

Unlike the previous model, the new model provides less outreach and case management services and instead emphasizes participation in prenatal and postpartum group sessions for women who are pregnant or parenting a child up to one year. DPH will conduct a solicitation to select new providers to implement the new model in FY 2014-15. This action is based on continued funding from the State and/or First 5 LA.

#### **IMPACT ON CURRENT SERVICES (OR PROJECTS)**

Approval of the recommended actions will allow DPH to continue to provide BIH services to improve the health of African-American pregnant and parenting women and reduce African-American infant mortality by assuring access to BIH services throughout Los Angeles County.

The Honorable Board of Supervisors 5/29/2012 Page 5

Respectfully submitted,

JONATHAN E. FIELDING, M.D., M.P.H.

Director and Health Officer

JEF:yl

Enclosures

c: Chief Executive Officer
Acting County Counsel
Executive Officer, Board of Supervisors

# DEPARTMENT OF PUBLIC HEALTH MATERNAL, CHILD, AND ADOLESCENT HEALTH PROGRAMS BLACK INFANT HEALTH PROGRAM SERVICES IN LOS ANGELES COUNTY

#### SUBCONTRACT AGENCY/CONTACT PERSON LIST

Contract #	Contractor/Contact Person	Estimated State Funding FY 2012-13 Allocation	Estimated First 5 LA FY 2012-13 Allocation	Total Maximum Obligation
H700539-7	The Children's Collective, Inc. 5870-C West Jefferson Blvd. Los Angeles, California 90016 (310) 733-4388 Fax (310) 733-4320 Jackie Kimbrough, Ph.D., Executive Director	\$294,355	\$195,583	\$489,938
H700540-7	Great Beginnings for Black Babies, Inc. 301 North Prairie Avenue, Suite 515 Inglewood, California 90301 (310) 677-7995 Fax (310) 677-1041 Rae Jones, Executive Director	\$305,180	\$203,032	\$508,212
H700341-8	Mission City Community Network, Inc. 15206 Parthenia Street North Hills, California 91343 (818) 895-3100 Fax (818) 895-9464 Nik Gupta, CEO/Chief Financial Officer	\$198,527	\$96,223	\$294,750
H700339-8	Prototypes, Centers for Innovation in Health, Mental Health and Social Services 1000 North Alameda Street, Suite 390 Los Angeles, California 90012 (213) 542-3838 Fax (213) 225-0085 Cassandra Loch, Executive, Director	\$187,354	\$90,846	\$278,200
H700340-9	Partners in Care Foundation 732 Mott Street, Suite 150 San Fernando, California 91340 (818) 837-3775 Fax (818) 837-3799 June Simmons, Chief Executive Officer	\$192,847	\$111,053	\$303,900
	Project Total	*\$1,178,263	\$696,737	\$1,875,000

<sup>\*</sup> State allocation consists of State Title V and Title XIX funds.

#### **EXHIBIT I**

## BLACK INFANT HEALTH PROGRAM SERVICES IN LOS ANGELES COUNTY AGREEMENT

	Amendment No		
	THIS AMENDMENT is made and e	ntered into this	
day of	f,	2012,	
	by and between	COUNTY OF LOS ANGELES (hereafter "County"),	
	and	(hereafter "Contractor").	

WHEREAS, reference is made to that certain document entitled "BLACK INFANT HEALTH PROGRAM SERVICES IN LOS ANGELES COUNTY AGREEMENT", dated June 15, 2004, and further identified as Agreement No.\_\_\_\_\_, and any Amendments thereto (all hereafter "Agreement"); and

WHEREAS, it is the intent of the parties hereto to amend Agreement to extend the term and increase the maximum obligation of County and make other hereafter designated changes; and

WHEREAS, said Agreement provides that changes may be made in the form of a written amendment which is formally approved and executed by the parties.

NOW, THEREFORE, the parties hereto agree as follows:

1. This Amendment shall be effective July 1, 2012.

- Paragraph 1, TERM, subparagraph one, shall be revised to read as follows:
   "1. <u>TERM</u>: The term of this Agreement shall be effective June 15, 2004 through June 30, 2013.
- 3. Paragraph 2, DESCRIPTION OF SERVICES, shall be revised to read as follows:
  - "2. <u>DESCRIPTION OF SERVICES</u>: Contractor shall provide the services described in Exhibit A-\_, Exhibit B \_\_, and Exhibit C-\_, Scope of Work, attached hereto and incorporated herein by reference."
- 4. Paragraph 3, <u>MAXIMUM OBLIGATION OF COUNTY</u>, Subparagraph K, shall be added to read as follows:

"K. During the period of July 1, 2012 through June 30, 2013, the maximum		
obligation of County for all services provided he	reunder shall r	not exceed
	(\$	).
Such maximum obligation is comprised of		
	(\$	) in California
Department of Public Health funds and		
(\$) in Los Angeles Cou	unty Children a	nd Family First-
Proposition 10 Commission (First 5 LA) funds.	This sum repre	esents the total
maximum obligation of County as shown in Sch	edule,	attached hereto and
incorporated herein by reference."		

5. Effective on the date of this Amendment, revised Exhibit C-\_\_\_ shall be attached hereto and incorporated herein by reference.

6.	Effective on the date of this Amendment, Schedule	shall be attached
hereto an	d incorporated herein by reference.	

7. Except for the changes set forth herein above, Agreement shall not be changed in any respect by this Amendment.

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IN WITNESS WHEREOF, the Board of Supervisors of the County of Los Angeles has caused this Amendment to be subscribed by its Director of Public Health, and Contractor has caused this Amendment to be subscribed in its behalf by its duly authorized officer, the day, month, and year first above written.

Ву_	
-	Jonathan E. Fielding, M.D. M.P.H.
	Director and Health Officer
	Contractor
	Contractor
Ву	
,	Signature
	Debate d Name
	Printed Name
Title	1
iiic	(AFFIX CORPORATE SEAL)

APPROVED AS TO FORM BY THE OFFICE OF THE COUNTY COUNSEL JOHN F. KRATTLI Acting County Counsel

APPROVED AS TO CONTRACT ADMINISTRATION:

Department of Public Health

Contractor:	
Contract Number:	

#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

The Contractor must work toward achieving the following measurable objectives. The objectives shall be achieved by following the work plan, that is comprised of implementation activities and methods of evaluation. Implementation activities are to be completed according to the timeline and are to be documented as specified.

#### Goals:

- 1. Reduce African American infant mortality through comprehensive community-based efforts by assuring that at-risk pregnant and parenting women and their children up to one year of age have access to quality maternal and child health services.
- 2. Increase the number of African American women who receive prenatal care in the first trimester.
- 3. Reduce the number of African American infants who weigh less than 2,500 grams at birth.
- 4. Reduce the number of African American women who smoke, use alcohol, and/or non-prescription drugs during pregnancy.
- Reduce the number of African American babies who die due to Sudden Infant Death Syndrome (SIDS).
- 6. Reduce African American maternal mortality.

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
1.1 By June 30, 2013, the Contractor will	1.1a Maintain culturally competent staff to	07/01/12 -	1.1a Maintain on file: current job descriptions;
conduct a community-based Black Infant	perform program services.	06/30/13	recruitment ads/bulletins/flyers;
Health (BIH) Program that supports,	The staff required to perform DILL convince.		employment applications and supporting documents.
facilitates, and promotes culturally competent and better health care services	The staff required to perform BIH services:		documents.
for at-risk African American women (18	Program Manager – Coordinate and oversee	Hire by	
years of age and older) who are pregnant	the implementation of the State BIH Prenatal	08/01/12	
or parenting a child under 1 year of age.	Care Outreach (PCO) and Social Support &	00/01/12	
or paroning a orma arraor i your or agor	Empowerment (SSE) models, and the Data		
A useful definition of cultural competence is:	Collection System (BIH-MIS). Serve as the		
"Cultural and linguistic competence is a set of	program liaison to DHS.		
congruent behaviors, attitudes, and policies that	Minimum Requirement – A Bachelors		
come together in a system, agency, or among	degree from an accredited college or		
professionals that enables effective work in cross-			
cultural situations."	administration, or a closely related field		
Characteristics that contribute to the "at viole"	and three (3) years of highly		
Characteristics that contribute to the "at-risk"	responsible staff experience including		
status include, but is not limited to (1) women who have experienced a fetal or infant demise, (2)	the supervision of 5 or more employees.		
women delivering a previous low birth weight	employees.		
and/or premature baby, (3) pregnant/parenting	Community Health Outreach Workers - Provide	Hire by	
women who have not accessed appropriate health		08/15/12	
care and/or other supportive services due to	PCO curriculum, and assist with SSE.		
systemic or personal barriers, (4)	Minimum Requirement – High School		
pregnant/parenting women who require	diploma or GED and six (6) months		
assistance in accessing and receiving MediCal	experience working with the public or		
and other required services due to systemic or	interacting with community groups		
personal barriers, and (5) women who have an	providing information.		
inadequate support system.			

Contractor:	
Contract Number:	

#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	Health Educator – Facilitate the SSE curriculum and coordinate SSE effort with care coordination services.  Minimum Requirement – A Bachelors degree from an accredited college or university in Health Education, Ethnic Studies, Social Work, or a closely related field or Three (3) years of recent experience conducting group presentations and working with atrisk or high risk African American women.	Hire by 08/15/12	
	Data Clerk/Administrative Assistant – Perform BIH-MIS data entry and clerical support.  Minimum Requirement – High School diploma or GED and one (1) year experience inputting significant amounts of data, and two (2) years experience performing general office duties including word processing, answering phones, and maintaining filing systems.	Hire by 08/15/12	

Contractor:	
Contract Number:	

#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE METHOD(S) OF EVALUATION
2.1 By June 30, 2013, the Contractor will ensure all BIH staff and subcontractors implementing program activities, are trained on the State-mandated Maternal and Child Health (MCH) Federal	2.1a Staff and subcontractors will attend the State MCH FFP Program (Time Study) training.	As scheduled 2.1a Maintain training certificates in employee and subcontractors' files.
Financial Participation (FFP) Program, and on the DPH Automated Time Study procedures.	2.1b Staff and subcontractors will attend DPH Time Study Training, which includes training on the Automated Time Study software.	As scheduled  2.1b Maintain training certificates in employee and subcontractors' files.
	2.1c To train staff and subcontractors that do not attend the State or DPH trainings, the Contractor will use the State DPH Time Study training outline to train staff and subcontractors within the first two (2) weeks of their employment.	07/01/12 - 06/30/13  2.1c Maintain current State-DPH training outline on file. Maintain training certificates in employee and subcontractors' files.
	2.1d Staff and subcontractors will complete quarterly time study forms for July and October 2012, and January and April 2013. Submit original forms to DPH no later than the 5 <sup>th</sup> working day of the month following the month the time study was conducted.	08/06/12 11/05/12 02/07/13 05/06/13 <b>2.1d</b> Maintain a copy of quarterly time study forms on file.

Contractor:	
Contract Number:	

#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE METHOD(S) OF EVALUATION
2.2 By June 30, 2013, the Contractor will ensure all BIH staff and subcontractors implementing program activities, are trained on the State-mandated BIH Prenatal Care Outreach (PCO) and Social	2.2a Staff and subcontractors will attend the State BIH PCO, SSE, and Data System (BIH-MIS) trainings.	As scheduled  2.2a Maintain training certificates in employee and subcontractors' files.
Support & Empowerment (SSE) model interventions, BIH-MIS, and other relevant training.	2.2b Review and update the PCO, SSE, and BIH-MIS training outline. Submit training outline to DPH for approval.	07/15/12 <b>2.2b</b> Maintain training outline and DPH approval on file.
	2.2c To train staff and subcontractors that do not attend the State BIH trainings, use the DPH-approved PCO, SSE, and BIH-MIS training outline. The Contractor will conduct and complete training for staff and subcontractors within the first sixty (60) days of their employment.	07/15/12 – 06/30/13  2.2c Maintain training certificates in employee and subcontractors' files.
	2.2d Provide staff and subcontractors training on perinatal health issues and other topics that will improve their knowledge and ability to perform program services competently. Training topics include, but are not limited to, those identified in the State PCO curriculum.	

Contractor:	
Contract Number:	

#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
2.3 By June 30, 2013, the Contractor will ensure all BIH staff and subcontractors implementing program activities are trained on the DPH Techniques to Document Well Baby Visits & Immunizations, Infant Sleep Patterns	2.3a Staff and subcontractors will attend the DPH scheduled <i>Techniques to Document Well Baby Visits and Immunizations</i> training.	As scheduled	Maintain training certificates in employee and subcontractors' files.
& Schedules, and Mother & Infant Oral Care.	2.3b To train staff and subcontractors that do not attend the DPH scheduled training, the Contractor will use the DPH Techniques to Document Well Baby Visits and Immunizations manual to train staff and subcontractors within the first sixty (60) days of their employment.	07/01/12 - 06/30/13	2.3b Maintain current DPH training manual on file.  Maintain training certificates in employee and subcontractors' files.
	Staff and subcontractors will attend the DPH scheduled Sleep Patterns and Schedules training.	As scheduled	Maintain training certificates in employee and subcontractors' files.
	2.3d To train staff and subcontractors that do not attend the DPH scheduled training, the Contractor will contact The Storks Stops Here and arrange training for staff and subcontractors within the first sixty (60) days of their employment.	07/01/12- 06/30/13	2.3d Maintain training certificates in employee and subcontractors' files.
	2.3e Document sleep patterns and schedules discussions on the Baby Sleep Conditioning (BSC) forms. Forms must include staff/subcontractor signature and the date(s) the topic was discussed with the client.	07/01/12- 06/30/13	2.3e Maintain BSC forms in client files. At the annual program review, client files will be reviewed.

Contractor:	
ontract Number:	

#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	2.3f Staff and subcontractors will attend the DPH scheduled Mother and Infant Oral Care training.	As scheduled	<b>2.3f</b> Maintain training certificates in employee and subcontractors' files.
	2.3g To train staff and subcontractors that do not attend the DPH scheduled training, the Contractor will contact National Health Foundation and arrange training for staff and subcontractors within the first sixty (60) days of their employment.	07/01/12– 06/30/13	2.3g Maintain training certificates in employee and subcontractors' files.
	2.3h Document dental referrals and final referral results in the greenbook on the 4 <sup>th</sup> blank line of the Client Referral Tracking form, page 5.	07/01/12– 06/30/13	At the annual program review client files will be reviewed.

Contractor:	
Contract Number:	

#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
3.1 By June 30, 2013, the Contractor will increase awareness about African American infant mortality and BIH Program services by conducting culturally competent street-based	3.1a Review and update the community education contacts protocol. Submit protocol to DPH for approval.	07/15/12	3.1a Maintain community education contacts protocol and DPH approval on file.
community education in the target area and document 1,164 (minimum) community contacts.	<b>3.1b</b> Update the resource directory/library and referral form(s) for staff and subcontractors to use.	07/01/12 - 06/30/13	3.1b Maintain an up-to-date resource directory/library and referral forms on file.
A community education contact is defined as speaking face-to-face with someone, or to a group of people, to inform them about African American infant mortality issues impacting the service area, and to identify African American women who are eligible for BIH services.  Target area - San Fernando Valley: 91402, 91304, 91321, 91325, 91330, 91331, 91340, 91350, 91351, 91352, 91355, 91356, 91364, 91403, 91423, and 91606	3.1c Develop or use existing culturally appropriate flyers/literature to disseminate during community education activities. Include a funding tag line that reads, "Funded by the California Department of Public Health, the County of Los Angeles Department of Public Health and First 5 LA." Materials should also have the State BIH logo imprinted on them. Submit created and existing materials to DPH for approval 3 days prior to intended use.	07/01/12 - 06/30/13	3.1c Maintain materials and DPH approval(s) on file.
	3.1d Schedule staff to conduct community education contacts in the target area. Staff and subcontractor itineraries must have a date, time, site name, zip code where the community education contact was made, and include a staff or subcontractor signature.	07/01/12 - 06/30/13	3.1d Maintain itineraries on file.

Contractor:	
Contract Number:	

#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	following the PCO curriculum and document activities. To validate (count) the contact, a completed Outreach Contact form must have at a minimum: a person's last name, first initial or name, residence zip code, phone number, date of contact, site name, zip code, and include the name of the staff or subcontractor making the contact. If contact was made with a potential client, also complete a CSI form. If contact was made at an event, also have a completed activity/event sign-in sheet and summary sheet. Submit activity/event summary sheet to DPH with the monthly report. The Contractor may use a copy of the Outreach Contact form found in the data forms book (greenbook), or can develop an Outreach Contact form for field use. The Contractor can only make a copy of the CSI form because changes cannot be made to the State CSI form.	07/01/12 - 06/30/13	3.1e Maintain an Outreach Activities Binder (organized by fiscal year and month) that contains completed Outreach Contact forms; Client Screening Instrument forms completed for women not enrolled in PCO; activity/event summary sheets and sign-in sheets. In monthly reports, document the number of activity/events conducted and the number of community education contacts.

Contractor:	
Contract Number:	

#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE METHOD(S) OF EVALUATION
4.1 By June 30, 2013, the Contractor will provide care coordination services to 125 (minimum) women enrolled in PCO.	Review and update the care coordination protocol. Submit protocol to DPH for approval.	08/01/12 <b>4.1a</b> Maintain care coordination protocol and DF approval on file.
Care coordination services are non-diagnostic (no medical or psychological diagnosis or treatment); CHOWs follow clients from a socioeconomic perspective only.	<ul> <li>4.1b Enroll women in PCO who meet program eligibility requirements (see total score and service decision on the CSI form). Submit a fiscal year-to-date BIH-MIS Caseload Report to DPH with the monthly report.</li> <li>A) CHOWs transfer the data on the Outreach Contact form onto the Outreach Contact form found in the greenbook, fill in any missing data, and file the original in the Outreach Activities Binder.</li> <li>B) The Data Clerk enters the new client's data into the BIH-MIS and obtains a BIH-MIS case number.</li> </ul>	07/01/12 - 06/30/13  4.1b Maintain Outreach Contact forms in the Outreach Activities Binder and file the copy of the CSI in the clients' files. Maintain the client's greenbook data in the BIH-MIS.
	4.1c Open a client file. Client files must be arranged in the same order and contain all administrative forms sited in the PCO curriculum. All files must have up-to-date documentation of interactions with the client (inclusive of all forms and progress notes), and up-to-date greenbook data. Also, maintain a list of incentives distributed to the clients, and a list of health education topics discussed with the client and signed-off by a staff/subcontractor signature and date. The Contractor must use file folders that can maintain the file's contents securely.	4.1c Maintain client files confidentially in locked cabinets and ensure client files and BIH-MIS data is made available upon request by State BIH personnel and/or authorized DPH BIH staff. At the annual program revie client files will be reviewed.

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
4.2 By June 30, 2013, the Contractor will ensure all BIH staff and subcontractors implementing program services, provide follow-up services.	4.2a Train staff and subcontractors to conduct one-on-one health education about topics that will be discussed with a client throughout participation in BIH.	07/01/12 - 06/30/13	<b>4.2a</b> Maintain training documentation in employee and subcontractors' files.
	4.2b Staff and subcontractors will conduct follow-up services to ensure clients have access to perinatal, post-partum, well baby care, immunizations, and other services deemed essential and appropriate for the health and welfare of the clients (mother, index child, and other family members). Follow-up services include, but are not limited to: completing assessment forms, inclusive of the Prenatal Supplemental Form; developing a care plan; making home visits; making referrals; conducting one-on-one health education; writing progress notes; completing client data forms; distributing incentives; participating in case conferences; coordinating other client-centered activities.	07/01/12 - 06/30/13	4.2b Maintain on file (organized by fiscal year and month) case conference sign-in sheets and minutes. Document follow-up services in the client files.  4.2b Maintain on file (organized by fiscal year and month) case conference sign-in sheets and minutes. The provided sign is a sign in the client files.
	4.2c Following the current immunizations schedule, CHOWs will document the immunizations the index child(ren) has received. If immunizations are not up-to-date, CHOWs will encourage and assist clients to obtain the needed immunizations.	07/01/12 - 06/30/13	<b>4.2c</b> Maintain in the client's file applicable progress notes, and record immunization data in the greenbook.

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
5.1 By June 30, 2013, the Contractor will conduct SSE classes and graduate 30 (minimum) clients.	5.1a Review and update the SSE care coordination protocol. Submit protocol to DPH for approval.	08/01/12	<b>5.1a</b> Maintain SSE care coordination protocol and DPH approval on file.
Clients are eligible to graduate upon completion of at least six (6) of the eight (8) SSE class sessions.	<ul> <li>5.1b Enroll PCO clients who are at moderate risk (based on a mid-range service decision score) in SSE.</li> <li>A) Using the client's completed SSE forms, the SSE Facilitator transfers the data to the SSE pages of the client's greenbook.</li> <li>B) Using the SSE-client's greenbook data, the Data Clerk enters the SSE data into the BIH-MIS.</li> </ul>	07/01/12 - 06/30/13	5.1b Maintain on file a SSE class roster for each SSE class series, and sign-in sheets for each SSE class session. Maintain the SSE-client's greenbook data in the BIH-MIS.
	5.1c Choose a section of the client's care coordination file to maintain SSE information. SSE-client papers must be arranged in the same order and contain all administrative forms sited in the SSE curriculum. SSE files must have up-to-date documentation of interactions with the SSE client (inclusive of all forms and progress notes), and up-to-date greenbook data. Also in the SSE section of the client's file, maintain a list of SSE incentives distributed to the clients. The Contractor must use file folders that can maintain the SSE papers securely.  A) For ease in accessing SSE client information, the SSE Facilitator may elect to maintain SSE client file while a SSE class series is in session, as long as the client is enrolled in the class	07/01/12 - 06/30/13	5.1c Maintain client files (permanent and/or temporary) in locked cabinets and ensure all SSE-client files and SSE BIH-MIS data is made available upon request by State BIH personnel and/or authorized DPH BIH staff. At the annual program review SSE-client files will be reviewed.

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	series. Upon graduating, or when the client is no longer participating in the current class series, all of the client's SSE forms must be placed in the care coordination file.		
5.2 By June 30, 2013, the Contractor will ensure the SSE-client receives follow-up services.	5.2a The SSE Facilitator will conduct follow-up SSE services to ensure clients are empowered through positive group support to make healthy lifestyle choices. Follow-up services include, but are not limited to: conducting SSE classes; collaborating with the client's CHOW to update the care plan; making a home visit; making referrals; writing SSE progress notes; completing SSE client data forms; distributing incentives; participating in case conferences; conducting other group health education forums; coordinating other client-centered activities.	07/01/12 - 06/30/13	5.2a Maintain on file (organized by fiscal year and month) case conference sign-in sheets and minutes. Document SSE follow-up services in the SSE section of the client's greenbook and file.

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES		IMPLEMENTATION ACTIVITIES	TIMELINE		METHOD(S) OF EVALUATION
6.1 By June 30, 2013, the Contractor will enter client data into the BIH-MIS.	6.1a	The Contractor will install all necessary computer equipment.	07/15/12	6.1a	At the BIH Program site, the Contractor has computer equipment that meets the State BIH-MIS specifications.
	6.1b	The Contractor will install the State BIH-MIS software.	07/15/12	6.1b	The software is installed.
	6.1c	Review and update the data collection-data entry protocol. Submit protocol to DPH for approval.	08/01/12	6.1c	Maintain data collection-data entry protocol and DPH approval on file.
	6.1d	Input, update, and maintain client data in the State BIH-MIS.	07/01/12 - 06/30/13	6.1d	Client data is successfully uploaded electronically each month to Branaugh Information Group (BIG). At the annual program review a client's MIS data will be compared to the data found in the client's file.
	6.1e	As specified by DPH, no later than the <b>15</b> <sup>th</sup> <b>of each month</b> submit BIH-MIS data reports along with the monthly report and invoice.	08/15/12- 06/30/13	6.1e	The DPH Contractor's Monthly Report and Invoice Log.

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE METHOD(S) OF EVALUATION	
7.1 By June 30, 2013, the Contractor will convene meetings with the BIH Community Advisory Board to obtain input and support for program activities, and to develop strategies to improve African American birth outcomes in the target area.	<ul> <li>7.1a The Contractor will identify and solicit a cross-section of community members to serve on the Community Advisory Board.</li> <li>7.1b The Contractor will select up to 21, but no fewer than 13, community members to</li> </ul>	08/01/12 <b>7.1a</b> Maintain letters of solicitation on file.  09/15/12 <b>7.1b</b> Maintain on file a current roster of board members.	rd
For the State annual report, DPH will give the Contractor a Committee Membership Form (Form 8) to	serve on the BIH Community Advisory Board.	members.	
complete and return to DPH before June 30, 2011.	<b>7.1c</b> Hold <b>quarterly</b> (minimum) Community Advisory Board meetings.	07/01/12 - 06/30/13 Maintain Community Advisory Board mee notices, agendas, and minutes on file.	
	7.1d In collaboration with the Community Advisory Board, the Contractor will identify First 5 LA-funded agencies to create referral/working relationships for the mutual benefit of clients and programs.	07/01/12– 06/30/13  7.1d Maintain Memorandums of Understanding on file.	gnit
8.1 By June 30, 2013, the Contractor will conduct a culturally specific public awareness campaign to inform and to educate the community about the importance for early access into, and maintenance of prenatal care.	8.1a In collaboration with the Community Advisory Board, the Contractor will review and update the 2010-11 campaign or develop a new First Trimester Enrollment Campaign. Campaign activities should include at least two (2) of the following activities: health fair; PSA; community meeting/event; flyer distribution. Submit campaign activity plans to DPH for approval at least 60 days prior to implementation.	8.1a Maintain Community Advisory Board mee notices, agendas and minutes that docum planning efforts. Maintain a copy of the F Trimester Enrollment Campaign plans an DPH approval on file.	cument e First

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES		IMPLEMENTATION ACTIVITIES	TIMELINE		METHOD(S) OF EVALUATION
	8.1b	Conduct First Trimester Enrollment Campaign activities. If applicable, complete summary sheets and activity/event sign-in sheet(s). Submit activity/event summary sheet(s) to DPH with the monthly report.	07/01/12 - 06/30/13		Maintain activity/event sign-in sheets and summary sheets in the Outreach Activities Binder.
	8.1c	As a result of the campaign, enroll women in PCO who meet program eligibility requirements.	08/01/12 – 06/30/13	8.1c	See Method(s) of Evaluation 4.1b
9.1 By June 30, 2013, the Contractor will conduct one (1) Celebrate Healthy Babies (CHB) event to celebrate BIH clients' successes and to mobilize the community around the issue of African American infant mortality.  BIH Program funding cannot be used to purchase food for this event or for any BIH program activities.	9.1a	In collaboration with the Community Advisory Board, the Contractor will plan and publicize the <i>Celebrate Healthy Babies</i> event. Submit the CHB plan and publicity (PSA; flyers; print articles; etc.) to DPH for approval at least <b>90 days</b> prior to a needed approval for the event.	07/01/12 - 06/30/13	9.1a	Maintain Community Advisory Board meeting notices, agendas, and minutes that document planning efforts. Maintain the <i>Celebrate Healthy Babies</i> plan, publicity, and DPH approval on file.
10.1 By June 30, 2013, the Contractor will educate pregnant clients on the causes of low birth weight.	10.12	materials to educate pregnant clients about the signs, symptoms, and causes (premature birth; drugs, alcohol, and tobacco use) of low birth weight. Include a funding tag line that reads, "Funded by the California Department of Public Health, the County of Los Angeles Department of Public Health and First 5 LA."	07/01/12- 06/30/13	10.12	Maintain materials and DPH approval(s) on file.

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

	SURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
		logo imprinted on them. Submit created and existing educational materials to DPH for approval <b>30 days prior</b> to intended use.		
		10.1b On the list of health education topics, include the causes of low birth weight subjects and document the dates and staff or subcontractor who discussed causes of low birth weight with the client and who distributed educational materials to the client.	07/01/12 - 06/30/13	10.1b Maintain list of health education topics in client files.
refer BII substan	30, 2013, the Contractor will I clients who use illicit ces, alcohol, and/or tobacco s to appropriate treatment	11.1a Provide staff and subcontractors training to identify clients who use alcohol, illicit substances, and or tobacco products.	07/01/12 - 06/30/13	11.1a Maintain training documentation in employee and subcontractors' files.
pi ogi alli		11.1b Develop or use existing perinatal-related alcohol, illicit drugs, and tobacco products educational materials to distribute to clients. Include a funding tag line that reads, "Funded by the California Department of Public Health, the County of Los Angeles Department of Public Health and First 5 LA." Materials should also have the State BIH logo imprinted on them. Submit created and existing materials to DPH for approval 30 days prior to intended use.	07/01/12– 06/30/13	11.1b Maintain materials and DPH approval(s) on file.
		<b>11.1c</b> Identify treatment programs and develop Memorandums of Understanding (MOU).	07/01/12 - 06/30/13	<b>11.1c</b> Maintain Memorandums of Understanding on file.

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES		IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
	11.1d	Staff and subcontractors will make appropriate referrals for clients in need of treatment services. Document referrals and final referral results in the greenbook on the Client Referral Tracking pages.	07/01/12 - 06/30/13	11.1d At the annual program review client files will be reviewed.
	11.1e	Monitor the client's efforts to eliminate or reduce the risky behavior, and provide positive reinforcement to encourage and support the client. Supply the client with appropriate health education material and make applicable progress note entries.	07/01/12 - 06/30/13	<b>11.1e</b> At the annual program review client files will be reviewed.
12.1 By June 30, 2013, the Contractor in conjunction with the California SIDS Program, will educate clients and their families about SIDS deaths in the African American community, and about	12.1a	Review and update the SIDS Education form and literature. Submit the SIDS form and materials to DPH for approval.	07/15/12	12.1a Maintain the SIDS Education form, educational materials, and DPH approval on file.
The strategies that may prevent SIDS.	12.1b	Conduct one-on-one SIDS education with clients at the following times: 8 <sup>th</sup> month of pregnancy; within two (2) weeks after the baby's birth; at the mother-infant 6-month follow-up home visit.	07/30/12 – 06/30/13	<b>12.1b</b> Maintain an up-to-date SIDS Education form in the client's file.
	12.1c	Within two (2) weeks after the baby's birth, staff or subcontractor will make a home visit to observe the newborn's sleeping position and sleeping area and provide the mother with appropriate feedback to reinforce the SIDS message.	07/30/12 – 06/30/13	12.1c Maintain documentation of the observations and feedback on the SIDS Education form.

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE OBJECTIVES	IMPLEMENTATION ACTIVITIES	TIMELINE	METHOD(S) OF EVALUATION
13.1 By June 30, 2013, the Contractor will implement a Quality Improvement Plan (QIP) process for continually assessing the program's effectiveness in accomplishing the BIH mission, goals, and objectives.	13.1a Review and update the QIP and submit to DPH for approval. The QIP shall include the following components: Quality Improvement Committee, Written Policies and Procedures, Client Feedback, Program Staff, Measurable Program/Service Quality Indicators, QIP Implementation, and QI Summary Reports. The QIP shall include the requirement for two (2) QI summary reports due mid-year and annually. These reports shall be developed by the QI Committee and signed by the Executive Director. The following reports shall be created:	10/01/12	13.1a Maintain QIP and DPH approval on file. Maintain QI Committee documentation, written policies and procedures, Mid-Year, and Annual QI Summary Reports on file and make available at the annual program review.
	A) Mid-Year QI Summary Report – Document areas of concern identified by the QI Committee; program performance indicators; results of process and outcome measures; data collected from client feedback; plans of corrective action.	12/15/12	
	B) Annual QI Summary Report – Document outcomes of implementing plans of correction action; overall QI process performance.	06/15/12	

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#### BLACK INFANT HEALTH (BIH) PROGRAM SCOPE OF WORK JULY 1, 2012 through JUNE 30, 2013

MEASURABLE O	BJECTIVES		IMPLEMENTATION ACTIVITIES	TIMELINE		METHOD(S) OF EVALUATION
14.1 Throughout the term maintain effective cor program coordination maximize program efficontinuity in the cour Program.	nmunication and with DPH to forts and to ensure	14.1a	Attend the monthly DPH BIH Team Meeting, and host one (1) of these meetings. Required attendees at the DPH BIH Team Meetings: Program Manager, SSE Facilitator, (1) CHOW.	08/01/12 – 06/30/13	14.1a	Meeting sign-in sheets.
		14.1b	Participate in other State BIH and/or DPH BIH meetings and activities.	As scheduled	14.1b	Meeting sign-in sheets.

SCHEDULE \_\_\_\_

### CONTRACTOR NAME BLACK INFANT HEALTH PROGRAM SERVICES IN LOS ANGELES COUNTY

	Budget Period
	July 1, 2012
	through
	June 30, 2013
Full-Time Salaries	4
Employee Benefits @ 30%	\$
Total Full-Time Salaries and Employee Benefits	\$
Part-Time Salaries	\$ -0-
Employee Benefits @ 14.32%	\$
Total Part-Time Salaries and Employee Benefits	\$ -0-
Total Salaries and Employee Benefits	\$
Operating Expenses	\$
Equipment	\$
Rent	\$
Subcontractor	\$
Indirect Cost @ 10% of Salaries	\$
TOTAL PROGRAM BUDGET	*\$

During the term of this Agreement, any variation to the above budget must have prior written approval of the Department of Public Health Director or his designee. Funds shall only be utilized for eligible program expenses.

<sup>\*</sup>Maximum Obligation is comprised of State Title V, First 5 LA and federal Title XIX Matching Funds.